Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid CRIS control number. Application or Cocket Number										
PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										
CLAIMS AS FILED - PART 1 (Column 1) (Column 2)						SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED				MUMBE	R EXTRA	RATE	FEE		RATE	FEE
BASI	C FEE FR 1.15(a))						•	OR		3
TOY	E CLASAS FR 1.16(c))		minus 20 ·			x 1	•	OR	× 4 •	
INDE	PENDENT CLAM	15	minus 3 = *			X1		OR	x s•	
(3) Crit Liston						••		OR	•••	
		NT CLAIM PRESEN		CFR 1.16(d)				TOTAL	·	
. 8 6	e difference in o	plumn 1 is less tha	N 5340, 841	er "O" in column 2	TOTAL		Q R	IUIAL		
CLAIMS AS AMENDED - PART II /////										
2	2-21-06 (Column 1) (Column 2) (Co				(Column 3)	SMALL E	NTITY _	OR	SMALL	
4	0.00	CLAIMS REMAINING AFTER AMENDMENT	•	HIGHEST HUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL . FEE		RATE	ADDI- TIONAL FEE
稟	Total	3O	Minus	2.7	• 3	x = 25 -		OR	xsv.	150
Ş	profit Links Independent profit Links	• 7	Minus	- 6	• 💝	× 1/00-		OR	x400 .	
AMENDMENT		U			01160	180		OR.	360	
FERST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (87 CFR 1.18(8))						TOTAL	-	1	TOTAL	
						ADD'L FEE		OR	ADD'L FEE	L
<u>- ک</u>	3706	(Column 1)		(Column 2) HIGHEST	(Column 3)			1		
NT B		CLAIMS REMAINING AFTER AMERICATENT		NUMBER PREVIOUSLY- PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	٠.	RATE	ADEH TIONAL FEE
ME	· Yotel or CFR LINES	. 30	Minus	30	• /	x 3•		OR	xs`•	
ENDMENT	Brdependerk GF CFR 1,4680	· /:	Minus	- φ	•	± 8=	•	OR	× 8 •	•
A		ATTOM OF SAIR THE	e desende	OUT CLAIM D7 CF	7R 1.4860)	+3		OR	+5 •	
FRET PRESENTATION OF MALTIPLE DEPONDENT CLAIM (27 CFR 1.15(4))						TOTAL ADO'L FEE		OR	TOTAL ADOL FEE	
(Column 1) (Column 2) (Column 3)										
AMENDMENT C	10-27-06	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TICINAL FEE
꽃	Total CP CPR LVR(C)	20	Minus	-30	- (× 1 •		OR	x s•	
呈	Independent gr GFR 1.4600	177	Minus	"6	1	x8		OR.	x \$*	
🚆	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLADM (67 CFR 1.18(d))					+;		OR	+ 5	
1900 (TEODISINATION AND AND AND AND AND AND AND AND AND AN						TOTAL ADD'L FEE	1	OR	TOTAL ADD'L FEE	
l	• If the entry in a	okume 1 in less th	en the entr	y in column 2, wi	ite Til' in column	1		J	• • • •	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".										

The Tiliphest Number Previously Paid For (Total or budge-andered) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to file (and by the This collection of information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to file (and by the This collection is estimated to take 12 minutes to complete, USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete interpretation form to the USPTO. Time will vary depending upon the individual case. Any comments including gathering, properties, and submitting the complete disposance for sequential contraction form to the USPTO. Time will vary depending upon the individual case. Any comments in the use of the complete to complete the formation form to the USPTO. Time should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.